



FORM C-08A: IN-STATE LICENSE REQUEST

Name: _____ DOB: ____/____/____

Address: _____ City: _____

State: _____ Zip: _____ Phone: (____)____-____ SSN: ____/____/____

Email: _____

Have you ever been convicted of a felony or any criminal offense? YES ☐ NO ☐

License Fee Schedule (Check level for application)

Emergency Medical Technician-Basic	\$25.00 _____
Emergency Medical Technician-Intermediate 85	\$50.00 _____
Emergency Medical Technician-Paramedic	\$75.00 _____

Submit all documentation to:
Office of EMS
Attn: Personnel Licensure
2600 Skyland Drive-Lower Level
Atlanta, GA 30319

Instructions on Obtaining Your Georgia EMS License

1. Complete the information on this form: Name, Current Mailing Address, Phone Number, Email Address, Social Security Number, and Date of Birth.
2. Obtain a money order for the amount of the Licensing Fee as noted in the schedule. Please make payable to the "Georgia Department of Community Health."
3. Obtain a national crime history report, as outlined in Procedure C-08: Licensing of EMS Personnel, for submission to the Office of EMS for review.
4. A recent passport size/style photo.
5. Place all materials in an envelope and mail to the address above.
6. In order for your license to be processed, your exam results and course completion materials must be in the Office of EMS database. Once all documentation is confirmed, your license will be mailed to you at the address you provide.

Congratulations on your successful completion of an approved EMS course and the National Registry Exam.
Your willingness to serve Georgia's public as an EMS professional is appreciated.